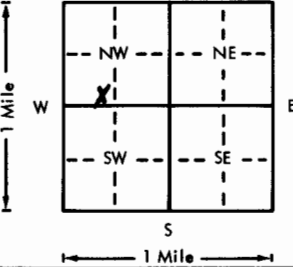


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and Environment  
Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

1. Location of well: County <u>Sumner</u> Fraction <u>1/4 SW 1/4 NW 1/4</u> Section number <u>13</u> Township number <u>T 30 S R 1 E</u> Range number <u>1 E</u>	
2. Distance and direction from nearest town or city: <u>2 1/2 S of Mulvane, KS</u> Street address of well location if in city: <u>Mulvane Rd</u>	
3. Owner of well: <u>Ellis Morgan</u> R.R. or street: <u>612 Cottonwood</u> City, state, zip code: <u>Mulvane, Kansas</u>	
4. Locate with "X" in section below:  Sketch map: <u>on the Belle Plaine Road + 1/4 E.</u>	
6. Bore hole dia. <u>5</u> in. Completion date: <u>4-7-76</u> Well depth <u>35</u> ft.	
7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
9. Casing: Material <u>STYRENE</u> Weight: <u>above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>91</u> lbs./ft. Dia. <u>5</u> in. to <u>35</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>35</u> ft. depth gage No. <u>200</u>	
5. Type and color of material	
<u>Blowoil (sand)</u>	From <u>0</u> To <u>2</u>
<u>Fine Sand</u>	<u>2</u> <u>15</u>
<u>Medium Sand</u>	<u>15</u> <u>32</u>
<u>Shale</u>	<u>32</u> <u>35</u>
10. Screen: Manufacturer's name <u>SUNFLOWER PLASTIC</u> Type <u>STYRENE</u> Dia. <u>5"</u> Slot gauge <u>.06</u> Length <u>12'</u> Set between <u>23</u> ft. and <u>35</u> ft. Gravel pack? <u>YES</u> Size range of material <u>1/4-1/2"</u>	
11. Static water level: <u>15</u> ft. below land surface Date <u>4-7-76</u> mo./day/yr.	
12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input type="checkbox"/> Date _____	
14. Well head completion: <u>Capped</u> Pitless adapter _____ inches above grade	
15. Well grouted? <u>YES</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>40'</u> to <u>14'</u> ft.	
16. Nearest source of possible contamination: <u>None</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
(Use a second sheet if needed)	
18. Elevation: _____ Topography: _____ Hill _____ Slope _____ Upland _____ Valley _____	19. Remarks: <u>Flat Ground</u> <u>Septic Tank was not installed when well was drilled.</u> <u>No apparent source</u>
20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Business name <u>HARP WELL + PUMP 236</u> License No. _____ Address <u>WICHITA, KANSAS</u> Signed <u>M. Orndel</u> Date <u>4-19-76</u> Authorized representative	

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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

for Contamination.